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Office Policies and Consent for Psychological Evaluation Services

Welcome to my practice. This document contains important information about my professional services and business practices. Please read it carefully and note any questions you might have so we can discuss them. Once you sign this, it will constitute a binding agreement between us.

Psychological Evaluation Services

I am a licensed psychologist, and my license is regulated by the State of California Department of Consumer Affairs, Board of Psychology. If you have any questions about the status of my license or the practice of psychology, please feel free to contact the Board of Psychology at either www.psychboard.ca.gov or (916) 263-2699. The Board of Psychology is located at 1422 Howe Avenue, Suite 22, Sacramento, CA 95825.

As a clinical psychologist with many years of experience in psychological testing, I am skilled in evaluating the following areas among children, adolescents, and adults:

- Learning disability and other cognitive evaluations (i.e., intelligence, processing, executive functioning, and memory). If a neuropsychological evaluation is warranted, I can assist in such a referral and offer the testing results from this evaluation.
- Attention-Deficit/Hyperactivity Disorder (ADHD) evaluations.
- Psychological and personality evaluations.
- Finally, I am experienced in deciphering complicated situations including the interface between cognitive, behavioral, and emotional functioning.

Evaluation Procedures

This psychological evaluation will consist of several important steps to thoroughly assess the areas of concern, provide diagnostic clarification, and offer valuable treatment recommendations. Rather than performing a broad-based evaluation, I will tailor this evaluation to your unique concerns. During most evaluations, I perform the following steps:

- Interviews with the adult patient (and possibly their partner or parent) or the child/adolescent patient and their parent/guardian (and possibly their teacher and physician). I will clarify the referral questions and areas of concern, and will gather developmental and psycho-social history.
- After at least one interview session, I will provide a written estimate of the number of hours and the cost of this psychological evaluation. I will again request your consent for the evaluation at this time.
- Review of records, including school and medical records as deemed necessary.
- For child/adolescent patients, I request that parents/guardians and teachers complete questionnaires. I might also conduct a school observation.
- Test administration, with individually selected measures to address the referral questions.

- Scoring, interpretation, and report writing.
- Consultation and collaboration with academic, medical, and other mental health professionals involved with the patient.
- Feedback session.
- Assistance in clarifying the treatment recommendations, and referrals to appropriate resources.

Please note that I will make as many referrals as necessary for the implementation of the recommendations, but I will generally not be responsible for monitoring such implementations. Further, although I will generate a full report of this psychological evaluation, I have the ethical responsibility to determine whether the full report or an abbreviated version will be supplied to the patient or parents. To clarify, there are circumstances in which the complexity of the full psychological evaluation report is best understood only by other trained mental health providers.

Location of Psychological Evaluation

The services will generally be conducted in my office. I am available to travel to a school site, with the charge of \$125 per hour for traveling.

Payment Policies

- Psychological evaluation services are charged at a rate of \$150 per hour.
- As noted above, I will provide a written estimate of the time and cost of this evaluation.
- You are expected to pay a retainer fee of the estimated cost prior to starting the evaluation. It is understood that the evaluation may take more or less time than estimated, and such when completed, a final statement will be provided.
- I do accept health insurance, and I am a provider on many insurance plans. However, insurance plans vary significantly as to their coverage of psychological testing. For example, they often do not pay for scoring, interpretation, and report writing (which are essential elements of the psychological evaluation). Thus, when requested by families, I attempt to determine a combination of insurance and cash payments. It is understood that the insurance company will send their payment check directly to Dr. Januszewski. Any payment not made by the insurance company is the responsibility of the patient.
- You will be expected to pay for any remaining balance prior to receiving the final evaluation report. Delinquent accounts (e.g., more than 60 days late) may be sent to collections. You agree to be responsible for all collection, court, and attorney fees required to collect outstanding balances on delinquent accounts.
- Credit card processing is available at this office. For self-pay evaluations, there is a discount for cash and check payments, to be discussed at the time of service. Please note that by signing this document and using this office's credit card processing, a receipt may be emailed to you directly.

Contacting Me

Please contact me at my office phone number for routine matters. If this is an urgent issue, please use my cellular phone number at (805) 216-3633. If you feel that you cannot wait for me to return your call, you should call 911 or go to the nearest emergency room. When on vacation, I will provide you with the name of a colleague whom you can contact if necessary.

Cancellation Policy

Please contact me immediately if you believe that there will be a scheduling or attendance problem. Because my time cannot be rescheduled on short notice, all notifications of cancellations must be made at least 24 hours before the scheduled appointment. All failed appointments and cancellations with less than 24 hours' notice will be charged \$100. Please note that insurance policies typically do not reimburse late cancellations or no-shows.

Confidentiality

Normally, all information discussed in therapy is confidential, and the only way private information can be released is if the patient gives written consent. However, there are certain legal exceptions to confidentiality that patients should understand in advance. Under California law psychologists are "mandatory reporters". Under certain conditions Dr. Januszewski may be required to report information that would otherwise be considered confidential if the patient is believed to be:

- A danger to others (threatening to harm or kill another person).
- A danger to self (threatening to harm or kill him or herself, or gravely disabled). In these cases reporting could include warning the patient's family or friends, or warning the police or other appropriate authorities.
- Child abuse: If there is suspicion of physical or sexual abuse, or neglect, of a child, I am legally required to report this information to the authorities. Sexual abuse includes use of child pornography (including internet porn) even when there is no hands-on sexual contact with children.
- Elder and dependent adults abuse.
- Court proceedings: If the patient becomes involved in court proceedings a therapist can be compelled to testify and/or release information by court order.

Most insurance companies require that the client authorize Dr. Januszewski to provide a clinical diagnosis and, in some cases, copies of treatment records. I need your written permission to release pertinent and required information to the insurance company or designated third party to process a claim. Please be aware that Dr. Januszewski does not have control over what happens to records after their release to other parties. Non-payment for 90 days constitutes a breach of contract and appropriate information may be released to collect payment.

Confidentiality with Court-Ordered Psychological Evaluations

Please note that confidentiality is not held in court-ordered evaluations, as listed in the above section. You will be asked to sign releases of information so that I can speak with collateral parties; however, the information gathered in this court-ordered evaluation will be included in the report.

Psychological Evaluation with Minors from Divorced Families

If your child is from a divorced family, I require consent for psychological evaluation and treatment from both parents, regardless of the custody status. We will discuss this prior to my meeting with your child. I will not make recommendations about custody or visitation arrangements. By signing this contract, you indicate your agreement that I will not be called as a witness and information from intakes and psychotherapy sessions will not be used in custody or divorce related matters.

Professional Consultation

I may occasionally find it helpful to consult other professionals about a case. During a consultation, every effort is made to avoid revealing the client's identity. The consultant is legally bound to keep the information confidential. I will not reveal information from such consultations to the client(s) unless I believe it is important for treatment.

I have read and understand the above provisions and agree to them.

Print name of patient

Date

Signature of patient or parent/legal guardian

Printed name of parent/guardian